TO BE FILED WITH:

Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080

Phone: (208) 334-2852 Fax: (208) 334-2282

State of Idaho

LOBBAIST	REPORT FORM			
ANNUAL		SEMI-ANNUAI		

Page	of	Page(s)
THIS	SPACE FOR OFFICE	E USE ONLY

Ben Ysursa Secretary of State

To Be Filed By:

LOBBYISTS (Sec. 67-6619) 07 JAN 29 PM 2: 09

WAR OF STATE STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered year ending 1/29/07 (Day) (Mo.) (Yr.) 12 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services **Total** *When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. 2 Names of Legislators, Public and Executive Officials in Group Date Place Amount Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) American Ins. Assn 980 N. 9th - Juite 2060 Who should file this form: Any lobbyist registered under Section No. 1 67-6617 Idaho Code Filing deadline: Annual report is due on January 31st. No. 2 Executive Lobbyist semi-annual report due July 31st.

No. 3

No. 4

Item 4		made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible perty to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.						
	Date	Amount	Name of Legislator, Public or Executive Official Receiving or Benefiting					
Item		of proposed legislation, the n Resolution or other legislati			LEGISLATIVE SUBJ	JECT	IDENTIFICATION	
5		as supporting or opposing.		Code	Subject	Code	Subject	
Subject (from	T 20 Legislati 7 20 20 20 20 20 20 20 20 20 20 20 20 20	Appropries Ident. Number of Ident.	riation Bill Number Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	17 18 19 20 21 22 23 24 25 26 27 28 29 30	Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
	20 22 22	1374 1374 1400 1421			ERTIFICATION: I hereby certify that priect statement in accordance with St			
	20	1423		\	Tr " 7	<u> </u>	1/29/07	
Item 6	contract bid	rule, ratemaking decision, or bid process, financial set t was supporting or opposin	rvices agreement or	L	obbyis t signature		Date	
				Er	nployer No. 1 signature		Date	
				Er	nployer No. 2 signature		Date	
				Er	nployer No. 3 signature		Date	
				Er	nployer No. 4 signature		Date	